PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10710396

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHE	R THAN
	OTAL OLABA		(Column 1)		(Column 2)		1	TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS 44			<u></u>					RATE	FEE		RATE	FEE
F	DR		NUMBER FILED		NUMBÉR EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	∑ ∅ minus 20=		. 60			X\$ 9=	540	OR	X\$18=	
INI	DEPENDENT C	CLAIMS	minus 3 =		*1			X43=	43	OR	X86=	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT	<u>-</u>				+145=	148	OR	+290=	·
* 1	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	•	TOTAL	1113	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
, ·	·	(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus ***		CI AINA	=	.	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-	OR	+290=	
	÷							TOTAL	-		TOTAL	
		(Column 1)		(Colum	ın 2)	(Column 3)	A	DDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X43=		OR	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
								+145=		OR	+290=	
		ΑĽ	TOTAL DIT. FEE	•	OR A	TOTAL DDIT. FEE						
_		(Column 1)		(Colum		(Column 3)		•				•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA			ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	十	X43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			OR	7.00-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL ODIT. FEE	
T	he "Highest Num	nber Previously Paid ber Previously Paid	For" (Total or	o SMACE IS I Independen	ess than t) is the h	o, enter "3." highest number		_	opriate box		•	